



Massachusetts Department of Environmental Protection
Bureau of – Waste Prevention – Solid Waste Management
BWP SW 14 Special Waste Determination – Major
BWP SW 31 Special Waste Determination – Minor
Application for Beneficial Use Determination

Transmittal Number # _____

Facility ID (if known) _____

A. Project Information

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



DIRECTIONS:
1. Specify the page numbers in which the following information is located.

2. Enter NA if information requested is not applicable.

1. Which permit category are you applying for? ☐ BWP SW 14 ☐ BWP SW 31

2. **General Information about the Solid Waste**

Page #

DEP USE ONLY

- a. General description of the waste

- b. Source of the waste

(1) Name of the generator

(2) Address of the generator

- c. Description of the industrial process which produces the waste

- d. Quantity (volume and/or tonnage)

3. **Management options evaluation**

- a. reduction

(1) physical/chemical

(2) other

- b. reuse

- c. recycling

(1) composting

(2) land application

(3) other

- d. other

(1) incineration

- e. criteria evaluation

(1) protection of public health, safety, and environment

(2) toxicity reduction and volume



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A. Project Information (cont.)

	Page #	DEP USE ONLY
(3) implementability	_____	_____
(4) cost	_____	_____
4. Chemical, Physical and Biological Properties of the Waste		
a. Chemical properties of the waste		
(1) pH	_____	_____
(2) reactivity	_____	_____
(3) leachability (TCLP test)	_____	_____
(4) total metals	_____	_____
(5) VOCs	_____	_____
(6) other appropriate constituents	_____	_____
b. Physical properties of the waste		
(1) particulate size	_____	_____
(2) density	_____	_____
(3) total solids	_____	_____
(4) volatile solids	_____	_____
(5) moisture content	_____	_____
(6) free liquid	_____	_____
c. Biological properties of the waste, if applicable		
(1) pathogens	_____	_____
4. Proposed Disposal Location and Handling Methods		
a. Proposed handling methods		
(1) transportation	_____	_____
(2) storage	_____	_____



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A. Project Information (cont.)

	Page #	DEP USE ONLY
(3) processing	_____	_____
b. disposal site	_____	_____
c. proposed method or methods for disposal	_____	_____

B. Certification: 310 CMR 19.011

Any person, required by these regulations or any order issued by the Department, to submit papers shall identify themselves by name, profession, and relationship to the applicant and legal interest in the facility, and make the following certification: "I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties both civil and criminal for submitting false information including possible fines and imprisonment.

Print Name _____

Authorized Signature _____

Position/Title _____

Date _____